

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ C C00562587		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee Peter James			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 05 / 2014		
Mailing Address 360 H St NE 421			Amount 1750.00		
City Washington		State DC	Zip Code 20002-4691		Transaction ID : VNV0C9P7KK5
Purpose of Expenditure Grassroots and Communication Services		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014	
Name of Federal Candidate Jim Rubens			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1605718.32			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Jacob Leonard			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 05 / 2014		
Mailing Address 4409 Duke St Apt 401			Amount 1750.00		
City Alexandria		State VA	Zip Code 22304-2532		Transaction ID : VNV0C9P7KC0
Purpose of Expenditure Grassroots and Communication Services		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014	
Name of Federal Candidate Jim Rubens			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1605718.32			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			3500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Mark McKinnon</u>			[Electronically Filed]		Date MM / DD / YYYY 09 / 06 / 2014